


## 1988 Behavioral Risk Factor Questionnaire

FIPS STATE CODE	STRATUM CODE	PSU NUMBER	RECORD NUMBER	DATE OF INTERVIEW	ID
MM	DD	YY			
(1-2)	(3)	(4-8)	(9)	(10-15)	(16-17)

HELLO. I'm \_\_\_\_\_ calling for the \_\_\_\_\_ residents. Your number has been chosen randomly by the \_\_\_\_\_ to be included in the study, and we'd like to ask some questions about things people do which may affect their health.

 Is this
 

Area Code		

Prefix		

Suffix	



(18-20)                      (21-23)                      (24-25)

**No** → Thank you very much, but I seem to have dialed the wrong number. It's possible that your number may be called at a later time. **STOP**

Is this a private residence?

**No** *Thank you very much, but we are only interviewing in private residences.* **STOP**

	Calling Period	Date/Time	ID #
	1 ○ ○ ○ ○	_____	_____
○ Line busy	2 ○ ○ ○ ○	_____	_____
● No answer	3 ○ ○ ○ ○	_____	_____
	4 ○ ○ ○ ○	_____	_____
	5 ○ ○ ○ ○	_____	_____

 Line busy  
 No answer

☐ Made appointment  
☐ Refused first time

**Spoke with:**

**Correct respondent is:**

**Call-back date & time**

or Refusal date & time:

**Additional information:**

My ID# \_\_\_\_\_

### Call Disposition Codes

- 01 — Completed interview
- 02 — Refused interview
- 03 — Non-working number
- 04 — No answer (multiple times)
- 05 — Business phone
- 06 — No eligible respondent at this number
- 07 — No eligible respondent could be reached during time period
- 08 — Language barrier prevented completion of interview
- 09 — Interview terminated within questionnaire
- 10 — Line busy (multiple tries)
- 11 — Selected respondent unable to respond because of physical or mental impairment

**Final Disposition  
of Telephone Call:**

(26-27)	

Edited by: \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

The interview will only take a short time, and all the information obtained in this study will be confidential. First, I'd like to begin by asking you about using seat belts.....

#### SECTION A: SEAT BELTS

1. How often do you use seat belts when you drive or ride in a car?

Would you say: PLEASE READ (31)

- |   |   |
|---|---|
| a. Always .....                               | 1 |
| b. Nearly Always .....                        | 2 |
| c. Sometimes .....                            | 3 |
| d. Seldom .....                               | 4 |
| OR  |   |
| e. Never .....                                | 5 |
| <u>DO NOT</u> Don't know/Not sure .....       | 7 |
| <u>READ</u> Never drive or ride in a car..... | 8 |
| <u>THESE</u> Refused .....                    | 9 |
| <u>RESPONSES</u>                              |   |

#### SECTION B: HYPERTENSION

These next questions are about hypertension or high blood pressure:

2. Have you ever been told by a doctor, nurse, or other health professional that you have high blood pressure?

PROBE FOR DOCTOR, NURSE OR OTHER HEALTH PROFESSIONAL (32)

- |   |   |
|---|---|
| a. No, <u>GO TO SECTION C (p.5)</u> .....             | 1 |
| b. Yes, by a doctor .....                             | 2 |
| c. Yes, by a nurse .....                              | 3 |
| d. Yes, by other health professional .....            | 4 |
| Don't know/Not sure <u>GO TO SECTION C (p.5)</u> .... | 7 |
| Refused <u>GO TO SECTION C (p.5)</u> ...              | 9 |

3. Have you been told on more than one occasion that your blood pressure was high, or have you been told this only once? (33)

- a. More than once ..... 1
- b. Only once ..... 2
- Don't know/Not sure ..... 7
- Refused ..... 9

4. Is any medicine currently prescribed for your high blood pressure? (34)

- a. Yes ..... 1
- b. No, GO TO Q 6 ..... 2
- Don't know/Not sure, GO TO Q 6 ..... 7
- Refused, GO TO Q 6 ..... 9

5. Are you currently taking medicine for your high blood pressure? (35)

PROBE FOR "ALL OR MOST OF THE TIME" OR "ONLY OCCASIONALLY" IF NECESSARY. IF ANSWER IS "YES", USE "YES ALL OR MOST OF THE TIME"

- a. Yes, all or most of the time ..... 1
- b. Yes, only occasionally ..... 2
- c. No ..... 3
- Don't know/Not sure ..... 7
- Refused ..... 9

6. As far as you know, is your blood pressure presently normal--or under control--or is it still high?

PLEASE NOTE: NORMAL OR UNDER CONTROL INCLUDES "RETURNED TO NORMAL" AND "NO LONGER HAVE HIGH BLOOD PRESSURE" (36)

- a. Normal ..... 1
- b. Under control ..... 2
- c. Still high ..... 3
- Don't know/Not sure ..... 7
- Refused ..... 9

SECTION C: EXERCISE

The next few questions are about exercise, recreation, or physical activities other than your regular job duties.

7. During the past month, did you participate in any physical activities or exercises such as running, calisthenics, golf, gardening, or walking for exercise? (37)

a. Yes ..... 1

b. No, GO TO SECTION D (p.8) ..... 2

Don't know/Not sure, GO TO SECTION D (p.8).. 7

Refused, GO TO SECTION D (p.8) ..... 9

8. What type of physical activity or exercise did you spend the most time doing during the past month? (38-39)

a. ACTIVITY ..... — —

SEE CODING LIST A Refused, GO TO Q 13 (p.6) ..... 9 9

Activity

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ASK QUESTION 9 ONLY IF ANSWER TO QUESTION 8 IS RUNNING, JOGGING, WALKING, OR SWIMMING, ALL OTHERS, GO TO QUESTION 10 (p.6).

-----

9. How far did you usually walk/run/jog/swim? (40-42)

a. Miles and tenths ..... — —

SEE CODING LIST B  
IF RESPONSE IS NOT  
IN MILES AND TENTHS

Don't know/Not sure ..... 7 7. 7

Refused ..... 9 9. 9

10. How many times per week or per month did you take part in this activity during the past month? (43-45)

- a. Times per week ..... 1 \_ \_
- b. Times per month ..... 2 \_ \_
- Don't know/Not sure ..... 7 7 7
- Refused ..... 9 9 9

11. And when you took part in this activity, for how many minutes or hours did you usually keep at it? (46-48)

- a. Hours & Minutes ..... : \_ \_
- Don't know/Not sure ..... 7: 7 7
- Refused ..... 9: 9 9

12. Was there another physical activity or exercise that you participated in during the last month? (49)

- a. Yes ..... 1
- b. No, GO TO SECTION D (p.8) ..... 2
- Don't know/Not sure, GO TO SECTION D (p.8).. 7
- Refused, GO TO SECTION D (p.8) ..... 9

13. What other type of physical activity gave you the next most exercise during the past month? (50-51)

- a. Activity ..... \_ \_
- Refused, GO TO SECTION D (p.8) ..... 9 9

SEE CODING LIST A

Activity

ASK QUESTION 14 ONLY IF ANSWER TO QUESTION 13 IS RUNNING, JOGGING,  
WALKING, OR SWIMMING, ALL OTHERS GO TO QUESTION 15

14. How far did you usually walk/run/jog/swim? (52-54)

a. Miles and tenths .....	_____
SEE CODING LIST B	
IF RESPONSE IS NOT	
IN MILES AND TENTHS	
Don't know/Not sure .....	7 7. 7
Refused.....	9 9. 9

15. How many times per week or per month did you take part  
in this activity? (55-57)

a. Times per week .....	1 _____
b. Times per month .....	2 _____
Don't know/Not sure .....	7 7 7
Refused .....	9 9 9

16. And when you took part in this activity, for how many minutes  
or hours did you usually keep at it? (58-60)

a. Hours & Minutes.....	____:____
Don't know/Not sure .....	7: 7 7
Refused .....	9: 9 9

SECTION D: DIET

17. About how much do you weigh without shoes? (61-63)

a. WEIGHT .....	<u>        </u> Pounds
Don't know/Not sure .....	7 7 7
Refused .....	9 9 9

18. About how tall are you without shoes? (64-66)

a. HEIGHT .....	<u>        </u> Ft/Inches
Don't know/Not sure .....	7 7 7
Refused .....	9 9 9

19. Are you now trying to lose weight? (67)

a. Yes .....	1
b. No, <u>GO TO Q 22 (p.9)</u> .....	2
Refused, <u>GO TO Q 22 (p.9)</u> .....	9

20. Are you eating fewer calories to lose weight? (68)

a. Yes .....	1
b. No .....	2
Don't know/Not sure .....	7
Refused .....	9

21. Have you increased your physical activity to lose weight? (69)

a. Yes .....	1
b. No .....	2
Don't know/Not sure .....	7
Refused .....	9

22. How often do you usually add salt to your food at the table?

Would you say: PLEASE READ (70)

- a. Most of the time ..... 1
- b. Sometimes ..... 2
- c. Rarely ..... 3
- OR
- d. Never ..... 4
- Don't know/Not sure ..... 7
- Refused ..... 9

23. Overall, would you say your diet is high, medium, or low in fiber? (71)

- a. High ..... 1
- b. Medium ..... 2
- c. Low ..... 3
- Don't know/Not sure ..... 7
- Refused ..... 9

24. Overall, would you say your diet is high, medium, or low in fat? (72)

- a. High ..... 1
- b. Medium ..... 2
- c. Low ..... 3
- Don't know/Not sure ..... 7
- Refused ..... 9



SECTION E: TOBACCO USE

Now, I would like to ask you a few questions about tobacco products.

25. Have you smoked at least 100 cigarettes in your entire life? (73)

100 CIGARETTES  
= 5 PACKS

- a. Yes ..... 1
- b. No, GO TO Q 29 (p.11) ..... 2
- Don't know/Not sure, GO TO Q 29 (p.11) ..... 7
- Refused, GO TO Q 29 (p.11) ..... 9

26. Do you smoke cigarettes now? (74)

- a. Yes ..... 1
- b. No, GO TO Q 29 (p.11) ..... 2
- Refused, GO TO Q 29 (p.11) ..... 9

27. On the average, about how many cigarettes a day do you now smoke? (75-76)

1 PACK =  
20 CIGARETTES

- a. Number of cigarettes ..... —
- b. Don't smoke regularly ..... 8 8
- Refused ..... 9 9

28. Have you stopped smoking for a week or more sometime during the past year? (77)

- a. Yes ..... 1
- b. No ..... 2
- Refused ..... 9

29. Have you ever used or tried any smokeless tobacco products such as chewing tobacco or snuff?

PROBE FOR CHEWING TOBACCO, SNUFF, OR BOTH (78)

- a. Yes, chewing tobacco ..... 1
- b. Yes, snuff ..... 2
- c. Yes, both ..... 3
- d. No, neither, GO TO SECTION F (p.12) ..... 4
- Don't know/Not sure, GO TO SECTION F (p.12). 7
- Refused, GO TO SECTION F (p.12) ..... 9

30. Do you currently use any smokeless tobacco products such as chewing tobacco or snuff?

PROBE FOR CHEWING TOBACCO, SNUFF, OR BOTH (79)

"Yes"

INCLUDES  
OCCASIONAL  
USE

- a. Yes, chewing tobacco ..... 1
- b. Yes, snuff ..... 2
- c. Yes, both ..... 3
- d. No, neither ..... 4
- Don't know/Not sure ..... 7
- Refused ..... 9

# SECTION F: ALCOHOL CONSUMPTION

These next few questions are about the use of beer, wine, or liquor-- all kinds of alcoholic beverages that people drink at meals, special occasions, or when just relaxing.

31. Have you had any beer, wine or liquor during the past month, that is, since \_\_\_\_\_? (80)

a. Yes ..... 1

b. No, GO TO SECTION G (p.15) ..... 2

Refused, GO TO SECTION G (p.15) ..... 9

32. During the past month, how many days per week or per month did you drink any beer? (81-83)

a. Days per week ..... 1 \_\_\_\_

b. Days per month ..... 2 \_\_\_\_

c. Never or none, GO TO Q 34 (p.13) ..... 8 8 8

Don't know/Not sure, GO TO Q 34 (p.13). 7 7 7

Refused, GO TO Q 34 (p.13) ..... 9 9 9

33. On the days when you drank beer, about how many beers did you drink on the average? (84-85)

a. Number of beers ..... \_\_\_\_

Don't know/Not sure ..... 7 7

Refused ..... 9 9

34. Also, during the past month, how many days per week or per month did you drink any wine? (86-88)

a. Days per week .....	1	___	___
b. Days per month .....	2	___	___
c. Never or none, <u>GO TO Q 36</u> .....	8	8	8
Don't know/Not sure, <u>GO TO Q 36</u> .....	7	7	7
Refused, <u>GO TO Q 36</u> .....	9	9	9

35. On the days when you drank wine, about how many glasses of wine did you drink on the average? (89-90)

a. Number of glasses of wine .....	___	___
Don't know/Not sure .....	7	7
Refused .....	9	9

36. And, during the past month, about how many days per week or per month did you have any liquor to drink, such as vodka, gin, rum, or whiskey? (91-93)

a. Days per week .....	1	___	___
b. Days per month .....	2	___	___
c. Never or none, <u>GO TO Q 38 (p.14)</u> .....	8	8	8
Don't know/Not sure, <u>GO TO Q 38 (p.14)</u> .....	7	7	7
Refused, <u>GO TO Q 38 (p.14)</u> .....	9	9	9

37. On the days when you drank any liquor, about how many drinks did you have on the average? (94-95)

a. Number of drinks .....	___	___
Don't know/Not sure .....	7	7
Refused .....	9	9

38. Considering all types of alcoholic beverages, that is beer, wine, and liquor, as drinks, how many times during the past month did you have 5 or more drinks on an occasion? (96-97)

a. Number of times .....	— —
b. None .....	8 8
Don't know/Not sure .....	7 7
Refused .....	9 9

39. And during the past month, how many times have you driven when you've had perhaps too much to drink? (98-99)

a. Number of times .....	— —
b. None .....	8 8
Don't know/Not sure .....	7 7
Refused .....	9 9

# SECTION G: PREVENTIVE HEALTH PRACTICES

Some people visit a doctor for a routine checkup, even though they are feeling well and have not been sick.

40. About how long has it been since you last visited a doctor for a routine checkup?

PLEASE READ

(100)

Was it:

- a. Within the past year .....(0 TO 12 MONTHS AGO) 1
- b. Within the past two years ...(13 TO 24 MONTHS AGO) 2
- c. Within the past five years ..(25 TO 60 MONTHS AGO) 3
- OR
- d. More than five years ago .....(61+ MONTHS AGO) 4
- Don't know/Not sure ..... 7
- Never ..... 8
- Refused ..... 9

These next questions are about blood cholesterol, which is a fatty substance found in the blood.

41. Have you ever had your blood cholesterol checked?

(101)

- a. Yes ..... 1
- b. No, GO TO Q 48 (p.17) ..... 2
- Don't know/Not sure, GO TO Q 48 (p.17) ..... 7
- Refused, GO TO Q 48 (p.17) ..... 9

42. About how long has it been since you last had your blood cholesterol checked?

PLEASE READ

(102)

Was it:

- a. Within the past year .....(0 TO 12 MONTHS AGO) 1
- b. Within the past two years ..(13 TO 24 MONTHS AGO) 2
- c. Within the past five years ..(25 TO 60 MONTHS AGO) 3
- OR
- d. More than five years ago .....(61+ MONTHS AGO) 4
- Don't know/Not sure ..... 7
- Refused ..... 9

43. Have you ever been told your blood cholesterol level, in numbers? (103)

- a. Yes ..... 1
- b. No, GO TO Q 45 ..... 2
- Don't know/Not sure, GO TO Q 45 ..... 7
- Refused, GO TO Q 45 ..... 9

44. What is your blood cholesterol level? (104-106)

- a. RECORD THE NUMBER ..... \_ \_ \_
- b. Don't know/Not sure ..... 7 7 7
- Refused ..... 9 9 9

45. Have you ever been told by a doctor or other health professional that your blood cholesterol is high? (107)

- a. Yes ..... 1
- b. No ..... 2
- Don't know/Not sure ..... 7
- Refused ..... 9

46. Are you now under the advice of a doctor to reduce your blood cholesterol or blood fat level? (108)

- a. Yes ..... 1
- b. No, GO TO Q 48 (p.17) ..... 2
- Don't know/Not sure, GO TO Q 48 (p.17) ..... 7
- Refused, GO TO Q 48 (p.17) ..... 9

47. Did the doctor:

47a. --prescribe a medication to lower your blood cholesterol? (109)

- a. Yes ..... 1
- b. No ..... 2
- Don't know/Not sure ..... 7
- Refused ..... 9

47b. --provide you a low fat or low cholesterol diet? (110)

- a. Yes ..... 1
- b. No ..... 2
- Don't know/Not sure ..... 7
- Refused ..... 9

47c. --refer you to a dietitian, nutritionist, or nurse to help you  
reduce the fat or cholesterol in your diet? (111)

- a. Yes ..... 1
- b. No ..... 2
- Don't know/Not sure ..... 7
- Refused ..... 9

48. Next, I'd like to ask you about diabetes, sometimes called sugar  
diabetes. Have you ever been told by a doctor that you have diabetes? (112)

- a. Yes ..... 1
- b. No ..... 2
- Don't know/Not sure ..... 7
- Refused ..... 9



Next I'd like to ask you about getting your blood pressure checked.

49. About how long has it been since you last had your blood pressure taken by a doctor or other health professional?

PLEASE READ

(113)

Was it:

- a. Within the past year .....(0 TO 12 MONTHS AGO) 1
- b. Within the past two years ...(13 TO 24 MONTHS AGO) 2
- c. Within the past five years ..(25 TO 60 MONTHS AGO) 3
- OR
- d. More than five years ago .....(61+ MONTHS AGO) 4
- Don't know/Not sure, GO TO Q 52 (p.19) ..... 7
- Never, GO TO Q 52 (p.19) ..... 8
- Refused, GO TO Q 52 (p.19) ..... 9

50. Blood pressure is usually given as one number over another.

Were you told what your blood pressure was in numbers?

(114)

- a. Yes ..... 1
- b. No, GO TO Q 52, (p.19)..... 2
- Don't know/Not sure, GO TO Q 52, (p.19)..... 7
- Refused, GO TO Q 52, (p.19)..... 9

51. What was your blood pressure, in numbers?

(115-120)

- a. RECORD THE NUMBER ..... \_ \_ \_ / \_ \_ \_
- b. Don't know/Not sure ..... 7 7 7 / 7 7 7
- Refused ..... 9 9 9 / 9 9 9

SECTION H: DEMOGRAPHICS

And finally, these next few questions ask for a little more information about yourself.

52. How old were you on your last birthday? (121-122)

a. CODE AGE IN YEARS .....	_____	_____
Don't know/Not sure .....	0	7
Refused .....	0	9

53. What is your race?

Would you say

PLEASE READ . (123)

a. White .....	1
b. Black .....	2
c. Asian, Pacific Islander .....	3
d. Aleutian, Eskimo, or American Indian .....	4
e. Other specify _____ .....	5
Don't know/Not sure .....	7
Refused .....	9

54. Are you of Hispanic origin such as Mexican American, Latin American, Puerto Rican, or Cuban? (124)

a. Yes .....	1
b. No .....	2
Don't know/Not sure .....	7
Refused .....	9

55. What is the highest grade or year of school you completed?

READ ONLY IF NECESSARY

(125)

- a. Eighth Grade or Less ..... 1
- b. Some High School ..... 2
- c. High School Grad or GED Certificate ..... 3
- d. Some Technical School ..... 4
- e. Technical School Graduate ..... 5
- f. Some College ..... 6
- g. College Graduate ..... 7
- h. Post Grad or Professional Degree ..... 8
- Refused ..... 9

56. Are you currently:

PLEASE READ

(126)

- a. Employed for wages ..... 1
- b. Self employed ..... 2
- c. Out of work for more than 1 year ..... 3
- d. Out of work for less than 1 year ..... 4
- e. Homemaker ..... 5
- f. Student ..... 6
- OR
- g. Retired ..... 7
- Refused ..... 9

57. And are you: PLEASE READ (127)

- a. Married ..... 1
- b. Divorced ..... 2
- c. Widowed ..... 3
- d. Separated ..... 4
- e. Never been married ..... 5
- OR
- f. A member of an unmarried couple ..... 6
- Refused ..... 9

58. Which of the following categories best describes your annual household income from all sources?

PLEASE READ (128)

- a. Less than 10,000 ..... 1
- b. 10 to 15,000 ..... 2
- c. 15 to 20,000 ..... 3
- e. 20 to 25,000 ..... 4
- e. 25 to 35,000 ..... 5
- f. 35 to 50,000 ..... 6
- OR
- g. Over 50,000 ..... 8
- Don't know/Not sure ..... 7
- Refused ..... 9

59. INTERVIEWER: INDICATE SEX OF RESPONDENT ASK IF NECESSARY (129)

- a. Male, GO TO Q 63, (p.23) ..... 1
- b. Female ..... 2

INTERVIEWER: ASK THIS QUESTION ONLY OF FEMALES  
BETWEEN 18 AND 45 YEARS OF AGE,  
OTHERWISE GO TO QUESTION 63, (p. 23).

60. To your knowledge, are you now pregnant? (130)

- a. Yes ..... 1
- b. No, GO TO Q 62 ..... 2
- Don't know/Not sure, GO TO Q 62 ..... 7
- Refused, GO TO Q 62 ..... 9

61. During what month is your baby due? (131-132)

- a. CODE MONTH, GO TO Q 63 (p.23) ..... \_ \_
- Don't know/Not sure, GO TO Q 63 (p.23). 7 7
- Refused, GO TO Q 63 (p.23) ..... 9 9

CODE MONTH:  
01=Jan, 02=Feb, etc.

62. Are you currently taking birth control pills? (133)

- a. Yes ..... 1
- b. No ..... 2
- Don't know/Not sure ..... 7
- Refused ..... 9

63. How many telephone numbers will reach this household, including the number I used today?

DIFFERENTIATE BETWEEN TELEPHONE NUMBERS AND  
TELEPHONE SETS IF NECESSARY. INCLUDE ALL  
TELEPHONE NUMBERS THAT CAN REACH HOUSEHOLD

(134)

a. Total Telephone Numbers ..... \_\_\_\_\_

INSERT ADDITIONAL MODULES OR QUESTIONS HERE

CLOSING STATEMENT

That's my last question. Let me emphasize that your answers cannot be identified with your name. Everyone's answers will be combined to give us information about the health practices of people in this state. Thank you very much for your time and cooperation.